## APPLICATION FOR SEARCH OF BIRTH RECORD FILES IN FORD COUNTY

Full Name:			
	First	Middle	Last
Place of Birt	h:	al City/Township	Country
	Street/Rie/Hospita	ar City/Township	County
Date of Birt	h:	Sex: Male Female	-
Father:			
	Full Name		
Mother:			
	Full Maiden Name	Married Name	
Parents Add	lress at Time of This	Birth:	
APPLICATION APPLIC	ON MADE BY:		
Name:			
Street Addre	ess:		
City:	State:	Zip Code:	
Signature: _			
Your Relatio	onship to Person:		
Driver Licen	se/Identification Ca	rd:	
Phone Num	ber		
Number of c	copies Desired:		

## A Copy of applicants State Issued Identification is required with this request

\$17.00 First Copy, \$8.00 Each Additional **per visit.** 

Genealogy Copies require a NON REFUNDABLE \$10.00 Search fee PLUS \$5.00 (SEARCH FEE MUST BE A SEPARATE CHECK OR MONEY ORDER) (Genealogical copies are non certified copies for those born 75 years ago or more only)

RETURNED CHECKS MAY RESULT IN A \$25.00 CHARGE

## Send to:

Ford County Clerk & Recorder 200 W. State St., Room 101 Paxton, IL. 60957